

Administrative Procedure 332 - Appendix A (NEW)

**STUDENT PERSONAL CARE PLAN
(Authorization and Informed Consent)**

Completed documents will be stored by the principal in accordance with the Freedom of Information and Protection of Privacy Act in the student file and in the student's Digital Student Record as a Health Information document, named as the original forms are named.

Student Information

Student's Name: _____ Date of Birth: _____

School: _____ Grade: _____

Address:
(Complete home address, including postal code if applicable)

Parent(s)/Guardian(s) Information

Parent(s)/Guardian(s) Name (print)

Parent(s)/Guardian(s) Name (print)

Parent(s)/Guardian(s) Contact Number:

Parent(s)/Guardian(s) Contact Number:

Parent(s)/Guardian(s) Email:

Parent(s)/Guardian(s) Email:

Section 1 – Student Personal Care Information

To be filled out collaboratively by Parent(s)/Guardian(s), Student (as appropriate) and School.

Description of Personal Care Required:

Purpose of Personal Care:

Agreed upon Personal Care:

Agreed upon Terminology: (what child is familiar with at home/what is appropriate for school use)

Related Instruction Regarding Care:

Agreed Upon Frequency for Personal Care:

Personal Care Items Parent(s)/Guardian(s) must Provide:

What to do if a Student Refuses Personal Care:

Termination Date of Personal Care: Year/Month/Date or Ongoing:

Plan for Off Site Field Trips (if applicable):

Section 2 – Student Personal Care Plan Information

To be filled out by the school

Location(s) Personal Care will be Provided:

Location(s) Where Personal Care Supplies are Kept:

Staff Members Trained to Provide Described Personal Care:

Method of Documentation:

Notes:

Section 3 – Approval of Student Personal Care Plan

Parents(s)/Guardian(s) Name (print)

Parents(s)/Guardian(s) Name (print)

Parents(s)/Guardian(s) (signature)

Parents(s)/Guardian(s) (signature)

Date

Date

Teacher Name (print)

Principal Name (print)

Teacher Signature

Principal Signature

Date

Date

The information on this form is being collected in accordance with the Freedom of Information Act, under the authority of the Education Act, and Peace River School Division policies and procedures. If you have any questions about the collection, use, or disclosure of this information, please contact the Peace River School Division FOIP Coordinator at 780-624-3601.

Adopted/Revised/Reviewed: SEPT 2024